



Maui United Way

## Maui United Way Olakino Initiative Mā'ona Food Security Grant Request for Proposals

Prior to the Maui Wildfires of 2023, the primary reason why those within Maui County called 2-1-1 was due to food insecurity and the fires only exacerbated this situation. Maui United Way is proud to be addressing this food crisis for our wildfire survivors, wildfire impacted, and support resiliency building for our community at large through this grant and is delighted to invite you to apply. We are offering grant awards starting at \$50,000 and capping at \$250,000. Agencies are limited to one grant application.

To increase accessibility and streamline processes, the application process involves a few basic questions and then a virtual interview. We hope these brief steps will help to address this community-wide need in a quick and efficient manner.

### 'Ōlelo Hawai'i Definitions (wehewehe.org):

**olakino:** n. State of health, constitution. Mea olakino, things necessary for life

**mā'ona:** (usually pronounced but not written mā'ana). vs. Satisfied after eating, full, satisfying; to have eaten, to eat one's fill.

**\*Please note: This worksheet is for your reference only.**

**If you choose to apply:**

- Sections A-G must be submitted online via e-CImpact on or before 5:00p.m. on October 8th, 2024.
- Once you submit online via e-CImpact, you will be emailed a link to sign up for a mandatory virtual interview between 10/4/24 and 10/16/24. Section H must be completed via a virtual interview/application conversation.
- Paper or email submissions will not be considered.
- A decision will be made by 10/31/24 and the grant period will be from 11/15/24-11/14/25.

Please follow [this link](https://agency.e-cimpact.com/login.aspx?org=13010F) to access the application portal.

<https://agency.e-cimpact.com/login.aspx?org=13010F>

## SECTION A: EXPECTATIONS (Complete through the online portal)

I, the undersigned, certify that I have reviewed the Expectations for Organizations Receiving Funding (below); the entire RFP Information Packet; and that the information provided to Maui United Way in this application for funding is true and accurate to the best of my knowledge, and is submitted in good faith.

**NOTE:** This is NOT a Funding Agreement. Adding your name to this section acknowledges that you have carefully reviewed the expectations for organizations that receive funding (below).

**If the organization is selected for funding, Maui United Way agrees to:**

- Provide funding for programs or services selected through the Emergency Food Security Grants process during the 2024-2025 funding year (November 15, 2024–November 14, 2025).
- Communicate and collaborate with funded organizations on topics such as other community resources, opportunities for collaboration, in-kind contributions, technical assistance, and training opportunities, etc., as appropriate.
- Facilitate collaborative efforts and provide training and educational opportunities to the extent applicable to the organization and the purpose of the grant.

**If the organization is selected for funding, the funded organization agrees to:**

- Provide program or services as outlined in its application for funding, including activities, outcomes, and budget, unless otherwise agreed upon;
- Cooperate with Maui United Way in requests for site visits, campaign speakers, fiscal and service information related to the use of funds allocated to organization by Maui United Way, and to the maintenance of the organization’s tax-exempt status;
- Obtain pre-approval from Maui United Way before the public release of any promotional or press materials that include the Maui United Way name, trademarks, brands, or logos. Any approval given by Maui United Way allowing agency to use the Maui United Way name, trademarks, brands, and logos may be revoked at any time in Maui United Way’s sole discretion. In the event of such a revocation by Maui United Way, Funded Organization shall immediately discontinue all uses of the Maui United Way trademarks, brands and logos and return or destroy all marketing, promotional and other materials that contain the same;
- Provide information as requested by Maui United Way including, but not limited to, the following requirements:

Signed agreement	Due November 8, 2024 (if awarded funding)
Notice of change in Executive Director or other key staff	Notification within 15 days of hire or taking office
Changes to program design, target population, collaboration partners, or budget	Requires written approval from Maui United Way Impact Staff
Mergers/Consolidations	Notification in writing 30 days before document is finalized
Adverse change in financial position	Notification in writing
Progress and Evaluation Reports	Submitted as requested

Progress Reports and Evaluation: Organizations receiving funding will be required to collect data and report regularly on the actual performance of your project.

Fundraising Policy - Restricted Activities: Organizations receiving funding may not solicit direct designations through Maui United Way workplace campaigns. Reference to the funded organization's eligibility to receive donor directed funds through the annual United Way campaign is permitted within the agency's regular newsletter or other communication tools. Such materials, however, cannot be distributed at Maui United Way workplace campaigns.

Enter name of organization's leader (e.g., CEO or Executive Director), indicating review and understanding of the above

\*Denotes a required field

\*Full Name:

\*Title:

**SECTION B: CONTACT INFORMATION**  
**(Complete through online portal)**

**General Information**

\*Legal Name of Organization:

DBA (if applicable):

\*Organization Full Mailing Address:

If your organization’s physical address differs from your organization mailing address, please provide the zip code and county of your physical address below:

Organization Physical Address Zip Code:

\*Organization Physical Address County:

\*Organization Phone:

\*Organization Website:

**Organization Primary Contact (CEO or Executive Director)**

\*Prefix:

\*First Name:

\*Last Name:

\*Title:

\*Phone:

\*Email:

**Application Contact (if not the CEO or Executive Director)**

Prefix:

First Name:

Last Name:

Title:

Phone:

Email:

## SECTION C: ORGANIZATION INFORMATION (Complete through online portal)

### Background Information

\*Mission Statement (500-character limit. Character count includes spaces.):

\*Year Founded:

\*Tax Exempt Status - Select one:

- 501(c)(3)
- Other
- Fiscal sponsor

If your organization has a 501(c)(3) designation, please enter your EIN:

If your organization has a designation other than 501(c)(3), please describe:

If your organization has a fiscal sponsor, please provide the name and EIN of the fiscal sponsor:

\*Number of full-time employees:

\*Number of part-time employees:

## SECTION D: GRANT REQUEST INFORMATION (Complete through online portal)

### Request Information

\*Select the services under which the proposal is being submitted:

*Select all that apply.*

- Creating/Delivering Community Food Boxes
- Creating/Delivering Community Hot Meals
- Creating, Maintaining or Piloting an innovative Food Security program for Maui County

\*You will be sent an invitation from our team to book your virtual application interview meeting after you submit your short application via e-CImpact. Please note that if your e-CImpact application is not completed, you will not be invited to an interview slot.

\*Type of Grant Requested: please select all that applies

- Food Security Operating Support (staffing)
- Programmatic Costs to buy Food or create/maintain or pilot an innovative Food Security program for Maui County

\*For all requests, describe how the grant will be used to support wildfire survivors and wildfire impacted. Specifically, please clarify the percentage of wildfire survivors and other target populations that will be served, including subsets such as keiki, kūpuna, and disabled individuals (500-character limit. Character count includes spaces.):

For program support requests, provide the name of the program/project:

If your program is already operating, please state how long your organization has administered the food security program/provided the service(s) described in this proposal (300-character limit. Character count includes spaces.):

Please enter the total amount of funding needed to execute your program for one year (November 15, 2024-November 14, 2025):

\*Amount requested from this Ma'ōna Food Security Grant:

## **SECTION E: TARGET POPULATION (Complete through online portal)**

Based on the service(s) selected, share the demographic information of the people you serve (using data for your most recent fiscal year) (i.e., % that are direct and indirect fire survivors, etc.). If Federal Poverty Guideline numbers are unavailable, please provide the best data you have, to support the economic need of the population served.

\* What is the geographic area of your service population, such as neighborhood, city, county-wide, etc.? Please be specific.

\*Number of Participants you propose to serve who are direct fire survivors:

\*Number of Participants you propose to serve who were indirectly impacted by the fires:

\*Number of Participants you propose to serve who were not impacted by the fires:

Participants with incomes at or below 150% of the 2024 Federal Poverty Guidelines

\*Percent of Participants below 150% FPL:

\*Number of Participants below 150% FPL:

Please provide **percent (%) of participants served**, who have incomes at or below 150% of the 2024 Federal Poverty Guidelines, for the following demographics:

- Gender
- Race / Ethnicity
- Language
- Housing
- Household Type
- Zip Code

## SECTION F: FINANCIAL INFORMATION (Complete through online portal)

### Financial Information

\*End Date of your Organization's Current Fiscal Year (mm/dd/yyyy):

\*Organization Income (per current fiscal year budget):

\*Organization Expenses (per current fiscal year budget):

\*Program Income (per current fiscal year budget) for the program you are applying for:

\*Program Expenses (per current fiscal year budget) for the program you are applying for including Administrative and Personnel costs:

\*Has your organization received Maui United Way funding in the past (other than donor designated funds)?

Yes

No

If yes, please explain which grants you received:

## SECTION G: REQUIRED ATTACHMENTS (Upload to online portal)

Include a header on each attachment that includes the name of your organization and the title of document. Please upload as separate PDFs (i.e., one pdf document per bullet point).

1. **IRS 501(c)(3) Determination Letter-** Attach a copy of the agency's IRS 501(c)(3) tax exemption letter showing your IRS Employer Identification Number. *If your organization has received funding from Maui United Way in the last 12 months, you do not need to upload this again.*
2. **Fiscal Sponsorship Agreement Letter-** Documentation between the sponsoring 501(c)(3) organization and the sponsored agency (if applicable).
3. **\*Budget(s)-** Organization's operating budget and program for the current fiscal year, including revenues and expenses. If available, include the budget for the upcoming fiscal year. If the organization has a fiscal agent, do not include the fiscal agent's budget.
4. **\*Current (Year-to-Date) Financial Statements-** Include a Statement of Financial Position (Balance Sheet) and Statement of Activities (Income and Expense Statement) through the most recently completed operating month available (must be within the past three months). Provide the Statement of Activities in a budget-to-actual format if the organization uses that format.
5. **\*Audit & Year-End Financial Statements-** Submit an annual independent audit for the most recent fiscal year completed by an independent Certified Public Accountant. If the organization's operating budget is under \$1,000,000, completed annual independent review and certified year-end financials approved by Board Chair and Executive Director may be substituted.
6. **\*Most Recently Completed IRS Form 990 -** Attach a copy of the agency's most recently completed IRS Form 990 including all applicable schedules. If your agency does not file a Form 990, please attach a copy of the agency's most recently completed IRS Form 990EZ or Form 990N (postcard). PLEASE NOTE: If your 990 is too large (over 16 MB), please try the following: Click "Print", select "Adobe PDF", then save the new file. It will likely be smaller. Split the PDF into two parts and upload the second half in the "Additional Upload Space."
7. **\*Hawaii Compliance Express Certificate of Vendor Standing-** Must be dated within the past 90 days of submitting this application. Certificate of Compliance through Hawaii Compliance Express (HCE). This is an electronic system that provides vendors, contractors and service providers doing business with state or county agencies to quickly and easily document that they are compliant with applicable laws. HCE expedites your ability to furnish proof of compliance with the requirements of [103D-310\(c\), HRS](#).  
Link to HCE: [Hawai'i Compliance Express \(ehawaii.gov\)](http://ehawaii.gov)
8. **Board Roster-** Attach a list of names of the agency's volunteer board members.
9. **Agency Logo-** Attach a copy of the agency's logo to be displayed on Maui United Way's website and promotional materials. Logo Requirements: 4 Color, 300 DPI, JPEG Format



## SECTION H: INTERVIEW (Presented via a Virtual Call)

In lieu of submitting a more formal grant application, a Virtual Call will be scheduled, allowing you to present justification for this award. The call will be no longer than 60 minutes. This includes 15 - 20 minutes of reviewer questions. Below are the expected criteria to provide and questions you will be asked during the interview process. Please prepare accordingly.

- Please be prepared to clearly identify the community target food security need. Tell us how your work addresses that need through your approach and strategies, showing how you will measure and target your results and use that information to show your approach is working to bring about positive community change.
- We ask that you respond to the questions (provided below) in a way that a reviewer who does not know about your work will be able to visualize and understand it.

On SignUp.com, the online tool that will be used for scheduling purposes, please be sure that the names you enter will be the same for the people joining you on the Virtual Call. These will be the only people we will be allowing into your Virtual Call. This signup.com link will be emailed to you by our MUW team once you complete your brief E-CImpact application and the hour-long time slot calls will take place between 10/4/24-10/16/24.

- This is your opportunity to share information about your work in the voice of staff and the people you serve.
- We will ask a series of five (5) questions, which are described below. Please be prepared to provide a response within a 2–3-minute timeframe for each question.
- Please note that only the **bolded portion** of the question will be asked. To assist you, guiding questions are provided below with each of the five (5) questions.
- You should be prepared to answer the question by responding to all sections completely. This is your opportunity to present a thorough description of the work that the food security funding requested will support.
- **We strongly recommend** that you create a short presentation, i.e. Canva, PowerPoint, etc. However, **we do not recommend using videos**, as we want to hear directly from you during the meeting.
- Up to four (4) people from your organization can be present during the remote Zoom call.
- **Remember, you will be presenting to a group of people who are cheering for you to succeed!**

**QUESTION 1**

**ALL APPLICANTS:**

**What is the community food security need that your organization is working to address?**

*Describe the need. Has the need increased or changed over time? Is this need a new initiative being addressed by your organization or continuation of an existing initiative? What data does your organization use to determine your approach to address this need? Why is it important for your organization to address this need?*

*How does your organization plan to create and distribute food boxes/hot meals to fire impacted families?*

*AND/OR*

*How does your organization plan to create, maintain or pilot an innovative food security program for Maui County?*

*Share how your approach is multi-faceted, layered, comprehensive, inclusive, and responsive.*

*How does your organization define “quality” in relation to the work for which you are applying?*

*How are your programs:*

- Honoring and responding to the needs and interests of participants and community?*
- Ensuring a physically, emotionally, and socially safe space?*
- Supporting learning and the creation of sustainable food systems?*
- Providing quality local foods?*
- Providing culturally aligned food options?*

## Question 2

ALL APPLICANTS:

**How else are you supporting our community?**

*Provide an overview of other services provided by your organization, or the connections that you make for clients to other organizations that support the needs of clients accessing your services.*

## Question 3

ALL APPLICANTS:

**How do you know that your work is successful in addressing the need you mentioned in Question 1?**

*Please specify the key data you collect to assess the impact of the services you mentioned in Question 2. At what points in time is this data collected? What is the data telling you about your success in addressing the need?*

*What tools do you use to collect and analyze data? In what database is the data stored?*

*Describe how your organization learns from and incorporates performance measurement findings to improve planning, strategy, and service delivery. Each proposal must include at least one notable illustration/example of organizational capacity to learn from its evaluation results to improve service delivery, related to the services mentioned in Question 2.*

## Question 4

ALL APPLICANTS:

**Tell us about your team.**

*Briefly summarize the history and experience of the organization working on the issue for which you are seeking funding.*

*Include an explanation on how your team is uniquely positioned to deliver results.*

*Emphasize why you believe you have the right capabilities, experience, and commitment to execute your work and have an impact.*

*Share plans your team may have to address key staff or leadership changes (this can include strategic planning and/or succession planning).*

## Question 5

ALL APPLICANTS:

### Diversity, Equity, Inclusion, and Representation

*Describe how your organization ensures diversity, equity, and inclusion within the board, committees, and staff. In particular, describe the efforts to include members of the community(ies) you serve, on the board, committees, and staff teams.*

*Beyond the board, committees, and staff, share the ways in which the voice, experience, and leadership of the community(ies) you serve are included in the programming, planning, implementation, and evaluation of the organization. Is your board and staff fluent in the same language(s) spoken by the community(ies) that you serve or by the intended target community(ies) that food security grant will support?*

*How is the community you serve represented/reflected in your leadership: Executive Director/CEO, Leadership Team, and Board?*

Mahalo for sharing your planned initiatives in addressing the food security needs within our community and for all of your hard work in preparing for our Virtual Call. Our Maui United Way Team will provide details regarding next steps and timeframes at the end this call.

## REPORTING INDICATORS

Below are the indicators on which funded organizations will be reporting. Please be sure that your organization is prepared to collect this information prior to submitting a proposal. If your organization has not historically collected this information (or metrics), please note that these are metrics will need to be collected moving forward and reported upon at the designated times.

### MUW Impact Reporting Indicators

#### General Impact Measurement Terms:

- **Baseline Data:** Establishing baseline metrics before the grant to measure changes accurately.
- **Quantitative and Qualitative Data:** Using both types of data to provide a comprehensive view of impact.

- **Longitudinal Tracking:** Tracking outcomes over the life cycle of the grant period to assess long-term impact.
- **Comparative Analysis (if applicable):** Comparing outcomes with similar programs or benchmarks, driven by your organization, to gauge effectiveness.

When reporting, consider the specific goals of the grant and choose indicators that best align with those goals to provide a clear and compelling narrative of impact.

<p>General (applicable to all grantees)</p>	<ul style="list-style-type: none"> <li>• Number of unduplicated participants served with family income at or below 150-200% of FPL (income level)</li> <li>• Number of individuals on SNAP</li> <li>• Age</li> <li>• Gender</li> <li>• Race/Ethnicity - Filipino, Hispanic, Native Hawaiian, Pacific Islander</li> <li>• Disability – (ensuring privacy and compassion) please describe if medical condition impair or limit activities of daily living (ADLs) or affect ability to work?</li> <li>• Language- English spoken in home?</li> <li>• Housing – Add in UW Mile High Language</li> <li>• Zip Code</li> <li>• Family type: Married or in a committed partnership, single parent, single, intergenerational? Single HOH? Keiki in household? Kupuna in household?</li> <li>• Community Engagement (partnerships, events hosted, events attended, flyers shared out, social media posts, website shares, etc.) Communicating in how many languages</li> <li>• Number of new team members (hires), Salary range and titles, supported through MUW funds – Workforce Development</li> <li>• Number of existing team members supported through MUW funds</li> <li>• Quantitative Research (pre and post) program/project impact.</li> </ul>
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Ohana Wellness + Resiliency: Food Security

Food Banks

- Number of pounds of food distributed
- Number of pounds of food rescued
- Number of partner organizations receiving food

Food Pantries

- Number of unduplicated individuals accessing food pantry
- Number of unduplicated families accessing food pantry
- Number of pounds of food distributed (organized by fresh vs. canned vs. organic, etc.?)

Congregate Meals/Meal Delivery

- Number of congregate meals served
- Number of meals delivered to homes
- Number of unduplicated individuals served
- Number of homebound for health or transportation issues individuals served?

Food Rescue

- Number of pounds of food rescued
- Number of pounds of food distributed
- Number of partner organizations receiving food

Safety Net/Supportive Programs

- Number of unduplicated individuals who were enrolled in SNAP
- Number of unduplicated individuals who were enrolled in WIC

Food Access

- Healthy and Nutritious Food
- How often do you have access to food of your culture
- Correlation to mental health
- % of food locally grown

## Mā'ona Food Security Application Rubric:

The rubric is used as a guide for reviewers as they learn about your work. You can use this information to guide your preparation for the application Zoom call.

<p><b>IMPACT</b></p> <p>Does the proposal describe an urgent community need? Will the proposed solution have an impact in addressing the problem? Does the proposed approach effectively progress toward a solution for the number of people served or the geography/community served?</p>	
1	Limited approach with little to no impact on a community need. Approach struggles to achieve results with no indication of positive impact.
2	Presented an effective solution to a serious and pressing problem. Approach describes promising positive impact.
3	Illustrated a powerful solution to a compelling and crucial problem. Approach delivers substantial positive impact.
<p><b>STRENGTH OF EVIDENCE</b></p> <p>Does the team successfully present strong evidence that the proposed strategy is effective? Does the organization demonstrate continuous learning and performance improvement from data collection?</p>	
1	Little to no evidence that the approach is effective. No continuous learning or performance improvement
2	Established reasonable record of results that is proven effective in addressing the community need. Delivers results over time and demonstrates a track record of success. Organization engages in continuous learning and performance improvement.
3	Strong, data-driven, approach with demonstrated success in producing intended outcomes for people served. Organization embraces a culture of continuous learning and performance improvement.
<p><b>TEAM</b></p> <p>Does the team have the skills, capacity, relationships, and experience to deliver on this proposal? Were the focus, outcomes, and services sufficiently detailed and measurable? Does the work show meaningful representation and inclusion of the population served? Organization leadership and decision makers are reflective of the community served.</p>	
1	Described a team with basic abilities but lacking in knowledge or training. Offered insufficient information on focus, outcomes, and services. No information on how the population served is included in the planning, programming, implementation, etc.
2	Led by a competent, qualified team with clear strengths. Presented realistic information on focus, outcomes, and services with sufficient attention to detail. Some information on how the population served is included in the planning, programming, implementation, etc.
3	Led by an experienced team of qualified experts who have achieved remarkable results. Focus, outcomes, and services grounded in past success, with rationale for that approach. There is meaningful representation and inclusion of the population served in planning, programming, implementation, etc. Organization leadership and decision makers are reflective of the community served.

